For (Title):

By (Inventors):

281	NONPROVISIONAL PATENT APPLICATION		
IN THE UNITED STATE	S PATENT AND TRADEMARK OFFICE		
<u>C</u>	P.O. ==		
6Aff & Berridge, plc P.G. Box 19928	Attorney Docket No.: 118200		
Alexandria, Virginia 22320	Date: February 10, 2004 $\supset 7$		
Telephone: (703) 836-6400			
Facsimile: (703) 836-2787	MAIL STOP PATENT APPLICATION		
Customer Number: 25944	NONPROVISIONAL APPLICATION TRANSMITTAL RULE §1.53(b)		
Commissioner for Patents	• ()		
P.O. Box 1450			
Alexandria, VA 22313-1450			
Sir:			
Transmitted herewith for filing under 37 C.F.R. §1.53(b	o) is the nonprovisional patent application		

SHEET GUIDING SYSTEM AND IMAGE FORMING DEVICE WITH SHEET GUIDING

 \boxtimes Formal drawings (Figs. 1-10B; 10 sheets) are attached.

Tetsuo ASADA

SYSTEM

Use Figure for front page of Publication. A Declaration and Power of Attorney is filed herewith.

This application claims benefit of Provisional Application No. filed

(A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.)

This patent application is assigned to BROTHER KOGYO KABUSHIKI KAISHA.

The executed Assignment is filed herewith.

An Information Disclosure Statement is filed herewith.

Entitlement to small entity status is hereby asserted.

A Preliminary Amendment is filed herewith.

Priority of foreign application No. 2003-085196 filed March 26, 2003 in Japan is claimed (35 U.S.C. §119).

A certified copy of the above corresponding foreign application is filed herewith.

This application is NOT to be published under 35 U.S.C. 122(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication of applications 18 months after filing.

図 The filing fee is calculated below:

CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	33 - 20	= 13*
INDEP CLAIMS	4 - 3	= 1*
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED		

^{*} If the difference is less than zero, enter "0".

SMALL ENTITY

RATE FEE <u>OR</u> \$ 385 <u>OR</u> 9 = \$ <u>OR</u> 43 = \$ <u>OR</u> \$ + 145 =<u>OR</u> **TOTAL** S **OR**

OTHER THAN A **SMALL ENTITY**

RATE	FEE	
	\$ 770	
x 18	\$ 234	
x 86	\$ 86	
+ 290	\$	
TOTAL	\$ 1090	

Check No. 150879 in the amount of \$1090.00 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff

Registration No. 27,075

Scott M. Schulte Registration No. 44,325

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